PD 7000038421

. (Re	equestor's Name)	
(Ac	ddress)	<u>.</u>
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
,		

Office Use Only



900132437139

07/14/08--01012--006 **35.00

Ma / Ris Lesign

SAME THAT OF STATE

FILEO

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ROLEKANI ENTERPI	RISES, INC.
	(Name of Corporation)
DOCUMENT NUMBER: P0700	00038421
The enclosed Officer/Director Resign	ation for a Corporation and fee are submitted for filing
Please return all correspondence conc	erning this matter to the following:
CARLOS GARCIA	
(Name of Person	<u>n)</u>
(Name of Firm/Com	pany)
2269 NW 20 STREET	
(Address)	
MIAMI, FLA. 33142	
(City/State and Zip (Code)
For further information concerning th	is matter, please call:
CARLOS GARCIA	at (305) 635-7131 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made p	payable to the Florida Department of State.
Street Address: Amendment Section	Mailing Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
Clifton Building	Post Office Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION 08 JUL 14 AM # 16 FOR A CORPORATION

MELICIE THAT OF STATE FALLARIASSEE, FLORIDA

_{I.} CARLOS GARCIA	, hereby resign as PRESIDENT	
~ · · · · · · · · · · · · · · · · · · ·	(Title)	
of ROLEKANI ENTERPRISES,		
(Nan	ne of Corporation)	
P07000038421	a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
	_	
	0.	
	(I) Li	
	(Signature of resigning officer/director)	

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314